

**2010 Kentucky HIV/AIDS
Ryan White Part B
Program
Quality Management Plan**

Kentucky HIV/AIDS Ryan White Part B Program Quality Management Plan

I. Vision: Ensure equitable access to comprehensive, quality health care, medications and supportive services for Kentucky residents Living with HIV/AIDS (LWH/A)

II. Mission Statement: The mission of the Quality Management Task Force (QMTF) is to monitor, evaluate, and improve the policies, procedures, and guidelines of the Kentucky HIV/AIDS Care Coordinator Program (KHCCP), the Kentucky AIDS Drug Assistance Program (KADAP), and the Kentucky Health Insurance Continuation Program (KHICP).

III. Goals:

- A) The Kentucky HIV/AIDS Ryan White Part B Program consisting of the KHCCP, KADAP, KHICP, and the Six regional Care Coordinator agencies will improve the quality of care and services for Kentucky residents Living with HIV/AIDS (LWH/A). This will be accomplished by:
- Using continuous quality improvement methodologies;
 - Scientifically evaluating client care and services on a routine schedule;
 - Acknowledging effective methodology by providers and widely disseminating information.

IV. Definitions:

- A) **Quality:** *The degree to which a health or social service provider meets or exceeds established professional standards and user expectations.*
- B) **Goal:** *What we are trying to accomplish – descriptive, specific actions/focus, time specific, measurable, defined participants.*
- C) **Performance Measure:** *A measure, objective or indicator used to determine (over time), an organization's performance of a particular element of care. It may measure a function, process, or outcome.*
- D) **Outcomes:** *Results (positive or negative) that may occur due to a performance measure.*
- E) **PDSA Cycle:** A model for improvement that includes four (4) steps - plan, do, study, act. It asks these questions:
- *Plan= What is the performance measure going to accomplish?*
 - *Do= How will the PM be carried out? Examples document problems and observations and gather data.*
 - *Study= What is the result of the plan after an analysis?*
 - *Act= What change can we make that will result in desired improvements?*

V. Structure:
A) Oversight Bodies: 1. Ryan White Part B Program staff including: (a) RW Grant Administrator (b) Kentucky HIV/AIDS Care Coordinator Program (KHCCP) Administrator (c) Kentucky AIDS Drug Assistance Program (KADAP) Administrator (d) Kentucky Health Insurance Continuation Program (KHICP) Administrator 2. Quality Management Task Force (QMTF) (a) Chairperson (b) Clinical Quality Management Advisor (c) Representative from each of the six regional Care Coordinator provider agencies
B) Dedicated Resources: 1. Kentucky HIV/AIDS Planning and Advisory Council (KHPAC) 2. Kentucky Ryan White Grantees (Part B, C, D, F) 3. University of Kentucky Clinic Pharmacy 4. Other entities as needed
C) Other Key Stakeholders: 1. Health Resources and Services Administration (HRSA) 2. Center for Disease Control (CDC) 3. AIDS Education Training Center (AETC) 4. Part B Consumers
D) Meeting Schedule: 1. The QMTF is scheduled to meet 4 times annually. Additional meetings will be scheduled on an as needed basis. 2. The QMTF meeting schedule will be reviewed annually.

VI. Quality Management Plan					
<ul style="list-style-type: none"> Part B Services: Kentucky AIDS Drug Assistance Program (KADAP) and Kentucky Health Insurance Continuation Program (KHICP). 					
Plan (Performance Measure)	Do	Updated to QMTF	Responsible Program/ Person	Study	Action Strategies
A. Ninety percent (90%) of recertified KADAP applications will be processed	KADAP Database beginning January 1-December 1, 2010..	Quarterly report through year 2010.	KADAP	Retention in care	1. Approval/denial letters mailed to the client and respective Care Coordinator within 5 working days from the date the application was received.
B. 95 % of eligible KHICP enrollees recertified for KHICP eligibility criteria six months from birth month beginning January 2010.	KHICP Database.	Quarterly report through year 2010.	KHICP-	Retention in care	1. Notify appropriate case managers and or/ supervisors of pending re-certifications that are due. 2. Modify re-certification process as needed. 3. Graph Data (optional)

VI. Quality Management Plan					
• Part B Services: Medical Case Management.					
Plan (Performance Measure)	Do	Updated to QMTF	Responsible Program/ Person	Study	Action Strategies
C. Percentage of newly diagnosed clients within the last six months, who enter into the KHCCP with an AIDS diagnosis. The measure should begin January 1 st through December 1, 2010.	1. Care Coordinator collects information during intake process. 2. Enter information into CAREWare database.	1. Bi-annually. 2. Quarterly to KHCCP Administrator with Quarterly Report.	1. All Care Coordinators	1. Determine cost increase of the KHCCP. 2. Retention in care for sickest patients.	1.Regions will measure using regional CW database system. 2. A six (6) month update (January 1-June 30,2010) from regions will be due to the Grantee Office by July 15 th , 2010. 3.The annual report (January 1-December 1, 2010) on regional performance measures are due to the Grantee Office by December 6, 2010.
D. By December 1, 2010, one hundred (100%) percent of Part B case managers will participate in one of the following initiatives to assist in finding individuals who do not know their status:	1.Data will be collected by each region utilizing a form that will be completed by the supervisor indicating the initiative the case manager competed.	1.A six (6) month report (January 1-June 30, 2010) will be due to the Grantee Office by July 15, 2010. 2. The annual report (January 1-December 1, 2010) will be due to the Grantee Office by December 6, 2010.	1. All Care Coordinators	1. All case managers will participate in the HRSA mandate to find individuals who are HIV positive, but are not aware of their status.	1.Conduct HIV/AIDS Testing and Counseling 2.Refer individuals to Testing and Counseling 3.Organize and/or collaborate a testing event 4.Conduct community/individual HIV/AIDS community forum This.
E. Research and Develop Part B funding formula for the contracted KHCCP providers.	1. QMTF will review various funding formula processes.	1. Monthly	1. QMTF in collaboration with KHPAC.	1. Determine equitable allocations of funds to contracted KHCCP providers.	In development pending consulting technical assistance training for QM committee and KHPAC.

VI. Quality Management Plan					
• Part B Services: Grant Administration					
Plan (Performance Measure)	Do	Updated to QMTF	Responsible Program/ Person	Study	Action Strategies
F. The Grant Administrator will make one (1) fiscal monitoring site visit to each of the six regional contractors by December 31, 2010.	1 Grant Administrator will set up appointment with each of the six regions in order to conduct one site visit by December 31, 2010.	2. Bi-annually.	1. KHCCP Grant Administrator	1. Fiscal Monitoring	1. Grant Administrator will monitor fiscal spending for all six regional KHCCP sites. 2. The Grant Administrator will document each visit with a site visit report submitted to each contractor reviewing any findings and or corrections that may need improvement.

<p>G. The Grant Administrator will ensure that all six (6) regional contractors submit monthly fiscal reports to the Part B program by the 15th of each month starting January 1 through December 31, 2010.</p>	<p>1. Grant Administrator will ensure that fiscal reports are emailed by the 15th of each month.</p> <p>2. Grant Administrator will notify any site within 5 days after the due date that has not email the monthly fiscal report.</p>	<p>1. This measure will be documented by the Grant Administrator monitoring the date each contractor email the report to the Part B program.</p>	<p>1. The Grant Administrator</p>	<p>1. Fiscal Monitoring</p>	<p>1. Grant Administrator will monitor fiscal spending for all six regional KHCCP sites.</p>
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VII. Outcomes for QM Plan		
Outcome Measure	Timeframe	Outcomes
• Part B Collaborative Outcomes		
A. Ninety percent (90%) of recertified KADAP applications will be processed	Bi-Annually Annually	
B. 95 % of eligible KHICP enrollees recertified for KHICP eligibility criteria six months from birth month beginning January 2010.	Bi-Annually Annually	
C. Percentage of newly diagnosed clients within the last six months, who enter into the KHCCP with an AIDS diagnosis. The measure should begin January 1 st through December 1, 2010.	Bi-annually Annually	
D. . By December 1, 2010, one hundred (100%) percent of Part B case managers will participate in one of the following initiatives to assist in finding individuals who do not know their status.	Bi-annually Annually	
E. Research and Develop Part B funding formula for the contracted KHCCP providers.	Bi-annually Annually	
F. The Grant Administrator will make one (1) fiscal monitoring site visit to each of the six regional contractors by December 31, 2010.	Bi-annually Annually	
G. The Grant Administrator will ensure that all six (6) regional contractors submit monthly fiscal reports to the Part B program by the 15 th of each month starting January 1 through December 31, 2010.	Bi-annually Annually	

VIII. Capacity Building for Part B Services			
What	Who	How	When
1. Survey Part B Care Coordinators to determine training needs.	Stacey Pruden will develop survey.	Create survey on Survey Monkey website.	Survey will be created by November 12, 2008.
	QMTF will analyze survey results and determine training needs.	Email survey to Care Coordinators for them to complete.	Survey will be sent to Care Coordinators and training needs will be determined by December, 2008.
2. Quarterly trainings for Part B Care Coordinators.	QMTF members	QMTF members will conduct quarterly trainings for Part B Care Coordinators based on survey results.	Quarterly meetings as scheduled.
3. Conferences: Kentucky HIV/AIDS State Conference.	All Part B Care Coordinators/Supervisors.	Care Coordinators/Supervisors must pick one to attend.	Conferences as scheduled.

Accepted by: _____

QMTF Chairperson

QMTF, Clinical Quality Management Advisor

QMTF Representative – Volunteers of America

QMTF Representative – Bluegrass Care Clinic

QMTF Representative – Northern Kentucky Health Department

QMTF Representative – Heartland Cares Inc.

QMTF Representative – Cumberland Valley Health Department

QMTF Representative – Matthew 25

Adopted: _____ **(date)**

Review Annually on: _____ **(date)**

Date(s) Reviewed: _____ **(date)**